

**Work Order ID 108428****\*108428\***

Page 1

October-17-13 1:30:39 PM

Item ID: D2268

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Placard

Start Date: 10/17/13 Start Qty: 12.00

**\*12\***

Cust Item ID:

Required Date: 10/17/13 Req'd Qty: 12.00

**\*12\***

Customer:

Reference:

Approvals: Process Plan: MLJDate: 13-10-21 Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date: SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2268	Rev B1								
100		0.00							
<b>*100*</b>	PURCHASING								
Purchasing		0.00							
Purchasing									
	Memo								
	Issue P/O: <u>21291</u> Make per Dwg D2268 Manufacture from 3M 7mil masking film p/n 8522CPMaterial release note required								
110	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*110*</b>									
Packaging		0.00							
Packaging									
	Memo								
	Ensure material release note is attached								
120	QC6- Inspect dimensions to drawing	0.00	DAS 27 9-89						
<b>*120*</b>									
QC		0.00	<u>B11.04</u>						
Quality Control									

CD 13/10/22 (12)P13/10/22 (12)12

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS						
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data	<input type="checkbox"/>											
Equip/Tooling	<input type="checkbox"/>											
Operator	<input type="checkbox"/>											
Material	<input type="checkbox"/>											
Setup	<input type="checkbox"/>											
Other	<input type="checkbox"/>											
Process	<input type="checkbox"/>											
Supplier	<input type="checkbox"/>											
Training	<input type="checkbox"/>											
Unapproved	<input type="checkbox"/>											
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled		
<input type="checkbox"/> Other												

Work Order ID 108428

October-17-13 1:30:39 PM

\*108428\*

Page 2

Item ID: D2268

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Placard

Stop

\*NS2\*

Start Date: 10/17/13 Start Qty: 12.00

\*12\*

Cust Item ID:

Required Date: 10/17/13 Req'd Qty: 12.00

\*12\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

Identify as per dwg & Stock Location: ST008

0.00

\*130\*

Packaging

Packaging

Memo

0.00

12X  
28  
9-89

DAS  
13-11-4

140

QC21- Final Inspection - Work Order Release

0.00

\*140\*

QC

Quality Control

Memo

0.00

*J/RM 13/11/07*  
*MF 13.11.05*

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS							
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>					
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data	<input type="checkbox"/>												
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FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
												<input type="checkbox"/> Other	

# Picklist Print

October-17-13 1:30:38 PM

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Work Order ID: 108428

Parent Item: D2268

Parent Item Name: Placard

Start Date: 10/17/13

Required Date: 10/17/13

Start Qty: 12.00

Required Qty: 12.00

Comments: IPP: B 01.04.09 Re-format EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2268P Placard		Purchased	No			110	Each	0.0000	1	12		13/14/14	(2)

NCR: Yes / No

DQA: Date:

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS									
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Doc/Data															
Equip/Tooling															
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Other															
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Supplier															
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Unapproved															
FAULT CATEGORY															
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled			
														<input type="checkbox"/> Other	



DESIGN B. WILLIAMS	DRAWN BY MIKE M	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED B.W.	APPROVED 	DRAWING NO. D2268	REV. B SHEET 1 OF 1
DATE 96.05.27		TITLE PLACARD	SCALE 1:1
B	96.05.29	UPDATED PLACARD	
B1	01.04.10	ADD MATERIAL NOTE	<i>4 IP</i>

**TOTAL WEIGHT IN THIS COMPARTMENT  
NOT TO EXCEED 15 lbs. (7Kg.)**

12-01-51  
C7W 8246801



MATERIAL: BLACK LETTERS ON WHITE ADHESIVE BACK  
MANUFACTURED FROM 3M 7 MIL MASKING FILM #8522CP



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO21791**

Purchase Order Date 10/22/2013

PO Print Date 10/28/2013

Page Number 1 of 1

Order From :  
STUDIO DE LETTRAGE 2001  
210 MAIN WEST  
HAWKESBURY, ON K6A 2H6  
CA

VC-STU001

Ship To : DART AEROSPACE LTD  
1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Contact Name  
Vendor Phone 613 632 5449

Buyer Chantal Lavoie  
Customer POID

Ship To Contact  
Ship To Phone  
Ship Via:  
Ship Acct:

Customer Tax # 10127-2607

Terms Net 30

Currency CAD

FOB Destination-Collect

*REVISI<sup>D</sup>*

Line Nbr	Reference Vendor Part Number	Description/ Mfg ID	Req Date/ CD Taxable	Req Qty/ Unit of Measure	PO Unit Price	Extended Price
1	D2268P	Placard	10/28/2013 Yes 10/28/2013	12.00 Each	\$7.08	\$85.00

AS PER DWG D2268 REV. B  
B108428

				Line Total:	\$85.00
2	D2269P	Placard	10/28/2013 Yes 10/28/2013	12.00 Each	\$7.08 \$85.00

AS PER DWG D2269 REV. B  
B108519

				Line Total:	\$85.00
				PO Total:	\$170.00

*CJL*  
Note: Pricing listed above is as per contract agreement between Dart Aerospace and the respective manufacturer.

No substitution or deviation without consent.

Certificate of Conformity or Material Certification required  YES  NO  
PST# 6122-5207

**Studio de Lettrage**

210 Main Street W  
Hawkesbury, Ontario K6A 2H6

**INVOICE**

Invoice No.: 21144  
Date: 10/31/2013  
Ship Date:  
Page: 1  
Re: Order No. WO11159

**Sold to:**

Dart Aerospace Ltd  
1270 Aberdeen  
Hawkesbury, Ontario K6A 1K7

**Ship to:**

Dart Aerospace Ltd  
Hawkesbury, Ontario

**Business No.:** 82500 7651 RT0001

Item No.	Unit	Quantity	Description	Tax	Unit Price	Amount
		12	Stickers D2268P Placard	H	2.9167	35.00
		1	Set up	H	50.0000	50.00
		12	Stickers D2269P Placard	H	2.9167	35.00
		1	set up	H	50.0000	50.00
			H - HST 13% HST			22.10
Studio de Lettrage HST: #825007651RT0001						
Shipped By:	Tracking Number:					
Comment:					Total Amount	192.10
Sold By:						

\*\*\*\*Certificate of Conformity\*\*\*\*

Customer:

Studio Lettrage

<u>Purchase Order #:</u>	<u>Packing Slip #:</u>	<u>Part #:</u>	<u>Serial #:</u>
	21194		

Description:

stickers

Quantity:

24

Certification:

We hereby certify that:

1. The above the listed items were manufactured, repaired and/or inspected in accordance with applicable drawings and/or specifications;
2. All work was accomplished in accordance with the Dart Aerospace Purchase Order;
3. Results of all inspections, chemical or physical tests, as well as other evidence, which shows the acceptability of raw materials, parts and/or assembly components are on file and available for inspection at any time.

Authority:

Avery

<u>APPROVAL:</u> Alexa Fleury	<u>DATE:</u>
<u>Signature:</u> Alexa Fleury	1st November 2013
<u>Title:</u> Project Coordinator	

## PRODUCT DATA SHEET



### Avery® IPM™ 2031

issued: 01/04/2005

#### Introduction

Avery® IPM™ 2031 is a high quality pressure-sensitive vinyl film, designed for use on wide format inkjet printers. Avery® IPM™ 2031 has excellent printing properties, allowing crisp print quality with bright and vibrant colours. Avery® IPM™ 2031 offers rapid ink drying and a water-resistant material. It combines good adhesion during its life and easy removal afterwards.

#### Description

Facefilm: 80-micron premium white calendered, topcoated vinyl.  
Adhesive: removable, acrylic based  
Backing paper: one side coated kraft paper, 140 g/m<sup>2</sup>

#### Features

- Excellent printability
- Vibrant and bright colours
- Crisp print quality
- Spray water resistant with specific pigmented inks
- Good adhesion, excellent removability
- Warranty on outdoor durability

#### Recommendations for use

A wide variety of full-colour graphics for indoor - and **short/medium term outdoor** applications such as posters, murals, displays, exhibition stands, vehicle graphics etc. Avery® IPM™ 2031 is suitable for application to a wide variety of substrates and will remove cleanly for up to 1 year after application.

IPM media should be handled with care as any surface contamination may affect the print quality. Media should be processed in an environment of 15-25°C and 30-70% relative humidity. After drying, the finished prints should be wrapped in polyethylene film and despatched flat or rolled with the printed side facing outwards. To protect prints against water, UV/light and abrasion, overlamination with a clear film is recommended. For specific details of Avery® DOL combinations, refer to "Technical Bulletin 5.3. Recommended combinations of Avery® Overlaminate and Avery® Digital Print Media"

**Always test your combination of Avery® IPM™ medium, inkjet printer and inks prior to commercial use.**

#### Compatibility

Avery® IPM™ 2031 is compatible with a broad selection of inkjet printers, when printing with pigmented, water based inks. For specific details refer to "Technical Bulletin 5.6 Avery Dennison Inkjet Print Media - Printer compatibility".

#### Durability:

Avery® IPM™ 2031 is warranted for outdoor use in conjunction with pigmented outdoor inks from HP, Encad and Colorscape. The warranted period varies from type of application and type of overlaminates from 18 months up to 5 years. For full details, see our Avery® IPM™ Outdoor warranty.



[www.averygraphics.com](http://www.averygraphics.com)

Graphics Division  
Rijndijk 86, P.O. Box 118  
2394 ZG Hazerswoude - The Netherlands  
Tel +31 71 3421500 - Fax +31 71 3421538

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